PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10827020

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY			OTHER THAN		
Τo	TAL CLAIMS		28			1011 21	•	TYPE [J 	OR	SMALL		
			00		- -		ļ	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ľ	BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			28 minus 20= 1		8	8		X\$ 9=		OR	, X\$18≃	144	
INDEPENDENT CLAIMS			# minus 3 = "					X43=		OR	X86=	86	
MULTIPLE DEPENDENT CLAIM PRESENT							Ī	+145≃	:	OR	+290=		
* If the difference in column 1 is less than zero, enter *0						olumn 2	ſ	TOTAL		OR	TOTAL	1000	
0/ CAIMS AS AMENDED - PART II											OTHER		
	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL		
AMENDMENT A		· CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	ER JSLY	PRESENT EXTRA	<u> </u>	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 28	Minus	- 28		= .		X\$ 9=		OR	X\$18=		
AME	Independent	• 4	Minus	*** H		=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
TOTAL ADDIT ESE										OR	TOTAL		
ADDIT. FEEON ADDIT. FEE _													
AMENDMENT B		CLAIMS REMAINING		HIGHE	ST	PRESENT	ŀſ		ADDI-			ADDI-	
	•	AFTER AMENDMENT	1	PREVIOL PAID F	JSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	.	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	***			lt	X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDEN				CLAIM		!	+145=	- · · · · · · · · · · · · · · · · · · ·		+290=		
									 	OR	TOTAL		
	•							TOTAL DDIT. FEE		OR	ADDIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	##	•	=		X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***		Ę.	計	X43=		٠	X86=		
2	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							7,40-	 -	OR	.700=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145=		OR	.+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE													
		nber Previously Pai					r loun	id in the app	ropriale box	in cal	ımn 1, *,		